

RECEIVED  
CENTRAL FAX CENTER

FEB 05 2004

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

OFFICIAL

In re Application of: )  
Joseph C. Salamone, et al. )  
 ) Examiner: K. L. Peng  
Serial No.: 10/003,635 )  
 ) Art Unit: 1712  
Filed: November 2, 2001 )  
 ) Docket No.: P02866  
Title: HIGH REFRACTIVE INDEX POLYMERIC )  
SILOXYSILANE COMPOSITIONS )

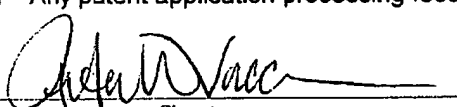
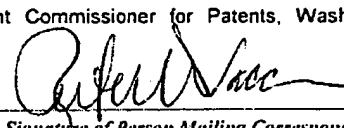
**Response to Office Action Final Rejection mailed September 23, 2003**

Commissioner of Patents and Trademarks  
Washington, D.C. 20231

**AMENDMENT AFTER FINAL**

Honorable Sir:

In response to the Office Action mailed September 23, 2003 regarding the above-identified application, enclosed find a Petition requesting an extension of time for response within the second month. Applicants also respectfully request reconsideration and allowance of pending claims 7-13 and 19-28 based on the following amendments and remarks.

<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>				Docket No. <b>P02866</b>	
Applicant(s): <b>JOSEPH C. SALAMONE ET AL.</b>					
Serial No. <b>10/003,635</b>	Filing Date <b>NOVEMBER 2, 2001</b>	Examiner <b>K. L. PENG</b>		Group Art Unit <b>1712</b>	
Invention: <b>HIGH REFRACTIVE INDEX POLYMERIC SILOXYSILANE COMPOSITIONS</b>				<b>RECEIVED</b> <b>CENTRAL FAX CENTER</b> <b>FEB 05 2004</b>	
<u>TO THE ASSISTANT COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	17 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	1 -	3 =	0 x	\$78.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>
<div style="display: flex; justify-content: space-between;"><div><input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 02-1425 A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</div><div style="text-align: right;">Dated: <b>FEBRUARY 5, 2004</b></div></div> <div style="display: flex; justify-content: space-between; margin-top: 20px;"><div> _____ Signature <b>RITA D. VACCA, REG. NO. 33,624</b>  <b>BAUSCH &amp; LOMB INCORPORATED</b> <b>ONE BAUSCH &amp; LOMB PLACE</b> <b>ROCHESTER, NEW YORK 14604-2701</b></div><div style="border: 1px solid black; padding: 5px; width: 30%; text-align: center;"><div>I certify that this document and fee is being deposited on <b>FEB. 5, 2004</b> with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.  _____ Signature of Person Mailing Correspondence <b>RITA D. VACCA</b> _____ Typed or Printed Name of Person Mailing Correspondence</div></div></div> <div style="margin-top: 20px;">CC:</div>					

P11LARGE/REV06